

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H19434

FILED  
Jan 10, 2004  
Secretary of State

Entity Name: WILLIS FAMILY STABLES, INC.

## Current Principal Place of Business:

18401 NW 27 AVE.  
MIAMI, FL 33056 US

## New Principal Place of Business:

## Current Mailing Address:

18401 NW 27 A VE.  
MIAMI, FL 33056 US

## New Mailing Address:

FEI Number: 59-2447838

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LARRY WILLIS  
18401 NW 27 AVE.  
MIAMI, FL 33056 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: WILLIS, LARRY  
Address: 18401 NW 27 AVE  
City-St-Zip: MIAMI, FL 33056

Title: D ( ) Delete  
Name: WILLIS, ANNETTE  
Address: 371 GOLDEN BCH DR.  
City-St-Zip: GOLDEN BCH, FL

Title: V ( ) Delete  
Name: WILLIS, JEFFREY  
Address: 13041 SW 40ST  
City-St-Zip: DAVIE, FL 33330

Title: T ( ) Delete  
Name: WILLIS, SCOTT  
Address: 2821 W LAKE VISTA CIRCLE  
City-St-Zip: DAVIE, FL 33328

Title: D ( ) Delete  
Name: WILLIS, DANIEL  
Address: 15799 SW 39 ST  
City-St-Zip: FORT LAUDERDALE, FL 33330

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY WILLIS

PS

01/10/2004

Electronic Signature of Signing Officer or Director

Date